

County: Milwaukee
 WEST ALLIS CARE CENTER
 6700 WEST BELOIT ROAD

Facility ID: 8380

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WEST ALLIS 53219 Phone: (414) 541-9840
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/00): 68
 Total Licensed Bed Capacity (12/31/00): 75
 Number of Residents on 12/31/00: 59

Ownership:
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Average Daily Census: 55

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	37.3		
Supp. Home Care-Personal Care	No					1 - 4 Years	40.7		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.4	More Than 4 Years	22.0		
Day Services	No	Mental Illness (Org./Psy)	45.8	65 - 74	11.9				
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	39.0				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	33.9	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.9	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)			
Other Meals	No	Cardiovascular	10.2	65 & Over	96.6				
Transportation	No	Cerebrovascular	10.2			RNs	4.7		
Referral Service	No	Diabetes	13.6	Sex	%	LPNs	8.8		
Other Services	No	Respiratory	3.4			Nursing Assistants			
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	16.9	Male	0.0	Aides & Orderlies			
Provide Day Programming for Developmentally Disabled	No		100.0	Female	100.0	29.2			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	9	100.0	\$217.00	39	97.5	\$101.87	0	0.0	\$0.00	10	100.0	\$125.00	0	0.0	\$0.00	58	98.3%
Intermediate	---	---	---	1	2.5	\$83.53	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	1.7%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	9	100.0		40	100.0		0	0.0		10	100.0		0	0.0		59	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing	% Totally	Total
Percent Admissions from		Activities of	%	Assistance of	Dependent	Number of
Private Home/No Home Health	11.4	Daily Living (ADL)	Independent	One Or Two Staff		Residents
Private Home/With Home Health	0.0	Bathing	0.0	44.1	55.9	59
Other Nursing Homes	6.8	Dressing	13.6	35.6	50.8	59
Acute Care Hospitals	79.5	Transferring	25.4	27.1	47.5	59
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	16.9	16.9	66.1	59
Rehabilitation Hospitals	0.0	Eating	64.4	16.9	18.6	59
Other Locations	2.3	*****				
Total Number of Admissions	44	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	10.2	Receiving Respiratory Care		10.2
Private Home/No Home Health	53.5	Occ/Freq. Incontinent of Bladder	55.9	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	47.5	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		1.7
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	10.2	Receiving Mechanically Altered Diets		47.5
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	46.5	With Pressure Sores	15.3	Have Advance Directives		89.8
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	43			Receiving Psychoactive Drugs		45.8

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	Proprietary			50-99		Skilled		Facilities	
	This Facility	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.3	74.6	0.98	86.1	0.85	81.9	0.90	84.5	0.87
Current Residents from In-County	93.2	84.4	1.10	90.2	1.03	85.6	1.09	77.5	1.20
Admissions from In-County, Still Residing	47.7	20.4	2.35	22.1	2.16	23.4	2.04	21.5	2.22
Admissions/Average Daily Census	80.0	164.5	0.49	168.8	0.47	138.2	0.58	124.3	0.64
Discharges/Average Daily Census	78.2	165.9	0.47	169.2	0.46	139.8	0.56	126.1	0.62
Discharges To Private Residence/Average Daily Census	41.8	62.0	0.67	70.9	0.59	48.1	0.87	49.9	0.84
Residents Receiving Skilled Care	98.3	89.8	1.09	93.2	1.05	89.7	1.10	83.3	1.18
Residents Aged 65 and Older	96.6	87.9	1.10	93.4	1.03	92.1	1.05	87.7	1.10
Title 19 (Medicaid) Funded Residents	67.8	71.9	0.94	51.5	1.32	65.5	1.04	69.0	0.98
Private Pay Funded Residents	16.9	15.0	1.13	36.3	0.47	24.5	0.69	22.6	0.75
Developmentally Disabled Residents	0.0	1.3	0.00	0.4	0.00	0.9	0.00	7.6	0.00
Mentally Ill Residents	45.8	31.7	1.44	33.0	1.39	31.5	1.46	33.3	1.37
General Medical Service Residents	16.9	19.7	0.86	24.2	0.70	21.6	0.78	18.4	0.92
Impaired ADL (Mean)	62.0	50.9	1.22	48.8	1.27	50.5	1.23	49.4	1.26
Psychological Problems	45.8	52.0	0.88	47.7	0.96	49.2	0.93	50.1	0.91
Nursing Care Required (Mean)	9.3	7.5	1.24	7.3	1.28	7.0	1.33	7.2	1.30